

Staple Issue Slip Here

POSITION	ID NO.	DATE
CLASSIFIER		
EXAMINER	60989	2-3
TYPIST		
VERIFIER		
CORPS CORR.		
SPEC. HAND	414	4-15-90
FILE MAINT.		
DRAFTING		

INDEX OF CLAIMS

Claim	Date
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SYMBOLS
 ✓ Rejected
 - Allowed
 (Through numbers) Canceled
 + Restricted
 N Non-elected
 I Interference
 A Appeal
 O Objected

(LEFT INSIDE)

Form
35 U:
Verifi

ADDRESS

TITLE

PART
FILED
NOTIC

Amount
\$12.00

Form PTO-436
(Rev. 5/92)